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DECLARATION/POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number		17942	
		First Named Inventor		Christopher N. Brindle et al.	
		COMPLETE IF KNOWN			
		Application Number			
		Filing Date		Herewith	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)		Group Art Unit			
		Examiner Name			

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS, METHODS AND ARTICLES OF MANUFACTURE FOR A LOW CONTROL VOLTAGE SWITCH

the specification of which

☒ is attached hereto

OR

☐ was filed on _____ as United States Application Number _____ or PCT International Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/410,647	September 13, 2002	

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DECLARATION - Utility or Design Patent Application			
Direct all correspondence to: <input type="checkbox"/> Customer Number or <input checked="" type="checkbox"/> Correspondence address below			
Name Joseph A. Tessari, Esquire			
Address Tyco Technology Resources			
Address 4550 New Linden Hill Road—Suite 140			
City Wilmington	State DE	Zip 19808-2952	
Country US	Telephone (302) 633 3566	Fax (302) 633 2776	
POWER OF ATTORNEY			
I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:			
Joseph A. Tessari	Registration No. 32177		
Driscoll A. Nima, Jr.	Registration No. 34685		
Robert J. Kapalka	Registration No. 34198		
Michael J. Aronoff	Registration No. 37770		
Salvatore Anastasi	Registration No. 39090		
T. Daniel Christenbury	Registration No. 31750		
Joseph E. Chovanes	Registration No. 33481		
Paul A. Taufer	Registration No. 35703		
Frank A. Cona	Registration No. 38412		
James E. Bauersmith	Registration No. 50533		
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>[] I hereby appoint the practitioner(s) associated with Customer Number 35811 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.</p> <p>[] Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).</p> </div> </div>			
DECLARATION			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) Christopher N.		Family Name or Surname Brindle	
Inventor's Signature		3/17/03	Date 3/17/03
Residence/City: Dracut	State MA	Country US	Citizenship US
Mailing Address: 48 Homefield Ave.			
Mailing Address:			
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Mark F.		Family Name or Surname Kelcourse	
Inventor's Signature <i>Mark F. Kelcourse</i>		Date <i>3/17/03</i>	
Residence/City: Lowell	State MA	Country USA	Citizenship USA
Mailing Address: 511 Princeton Blvd.			
Mailing Address:			
City: Lowell	State MA	Zip 01851	Country USA
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence/City:	State	Country	Citizenship
Mailing Address:			
Mailing Address:			
City:	State	Zip	Country
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence/City:	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence/City:	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

[] Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.